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FEC FORM 2 STATEMENT OF CANDIDACY

2813 APR 29 AM 8: 31

(()	(a) Namerof Oandidate (in full)			LC	MAIL GENTER
	Christin Noel Griskie	Mohadi i addisas shansad	4.	2. Identification Number	······································
	(b) Address (number and street) 17214 Front Beach Road	✓ Check if address changed	■())	C00497552	
	(c) City, State, and ZIP Code Panama City Beach		■ (v)	3. Is This Ne Statement (N)	
((140	Office Sought President	6. State & Distr Florida	ict of Candidate	
-4.N		GNATION OF PRINCIPAL		0046	election(s).
70	7. I hereby designate the following named political committee as my Principal Campaign Committee for the				
	(a) Name of Committee (in full)	with the appropriate office listed in the	e instructions.		
	Campaign Griskie				
	(b) Address (number and street)				
	17214 Front Beach	Road T-31			
,	(c) City, State, and ZIP Code				
	Panama City Beacl	h, Florida 32413			
	NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full)				
	(b) Address (number and street)				
	Carlotte with the second of the control of the cont				
	(c) City, State, and ZIP Code				
		and this Statement and to the best of a	v knowledne a	nd belief it is true, correct i	and complete.
	I certify that I have examir	ieu u lis staterrierit artu tu u le best ur ri			
	I certify that I have examin	10	y moweage a	Date	
	Signature of Candidate	The statement and to the best of the	y moweage a	Date	22/13
	Signature of Candidate	yf -		Date 4/2	
	Signature of Candidate	yf -		Date 4/2	
	Signature of Candidate	yf -		Date 4/2	
	Signature of Candidate	incomplete information aney subject the		Date 4/2	
	NOTE: Submission of false, erroneous, or	incomplete information aney subject the	e person signin	Date 4/2	ies of 2 U.S.C. §437g. FEC FORM 2 (REV. 12/2008)
	NOTE: Submission of false, erroneous, or To print and file this for	incomplete information aney subject the	e person signin	g this Statement to penalt	FEC FORM 2 (REV. 12/2006)

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DATE PREPARED

(3/2005)

PREPARER